MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO: 10/581,624

FILING DATE:

APPLICANT(S):

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		1					53						
4		3 1					54						
5		1 3					55						
6		3 1					56						
7		1 3					57						
8		1					58						
9		1					59						
10		2					60						
11		1					61						
12							62						
13							63						
14							64						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	8	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	9						TOTAL CLAIMS						

PTO-1360 (REV. 9/03)